

# Technology in Practice: Promoting Participation in Patients with High Level Spinal Cord Injury

Morgan Gill, Kate Nuschke, Kaitlin O'Sullivan, Casey Puvogel, Alex Sagnor

**Contact:** keosull@gmail.com

**Faculty Mentor:** Teal Benevides, MS, OTR/L

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**Objectives:** At the conclusion of this presentation, the learner will be able to:

- Evaluate different modes of technology used to improve participation in daily occupations with individuals with high-level spinal cord injury (SCI)
- Integrate current evidence into clinical practice
- Discuss implications for future practice, research, and education

**PICO:** Does the use of technology in individuals with cervical and thoracic level spinal cord injuries improve participation in daily occupations?

## Methods:

Population	Intervention	Outcome
Cervical SCI, thoracic SCI, tetraplegia, quadriplegia	FES, robotic, OT, eye gaze, hand, grasp, neuroprostheses, technology	Function, participation, social, leisure, work, ADL, occupation, driving, QOL, self-care, activity, upper limb, upper extremity
Search Limitations: English language, human subjects, adolescents and adults, published 2000-2013		
Databases Used: PubMed and CINAHL		Total Articles Found: <u>1,530</u>
Inclusion Criteria	Exclusion Criteria	
<ul style="list-style-type: none"><li>- Cervical and thoracic level injuries</li><li>- Upper extremity interventions</li><li>- Functional electrical stimulation (FES)</li><li>- Neuroprostheses</li><li>- Electronic aids to daily living (EADL)</li><li>- Functional activity</li></ul>	<ul style="list-style-type: none"><li>- Paraplegia</li><li>- Co-morbid physical disabilities</li><li>- Only incomplete injuries</li><li>- Interventions related to mobility</li><li>- Pediatric populations</li></ul>	
	Final Article Count Based on Inclusion & Exclusion Criteria: <b>14</b>	
Qualitative article critical review form: Letts et al., 2007		Quantitative article critical review form: Law et al., 1998

## Results & Clinical Significance:

<b>Surface FES</b>	- Improved performance in communication management, home management, grooming, and feeding <sup>3,10,11</sup> - Improved performance in leisure participation <sup>3,10</sup> - Research conflicts on ease of home use <sup>3,10</sup>
<b>Implanted FES</b>	- Improved participation in feeding and grooming <sup>7,12,13,14</sup> - Improved participation in communication and home management <sup>7,12,13,15</sup> - Improved performance satisfaction in meaningful activities <sup>7,12,13,14,15</sup>
<b>EADL</b>	- Increased independence in ADLs, leisure participation and comfort in the home <sup>4,6,16</sup> - Improved perception of self-efficacy, competency, adaptability, and self-esteem <sup>4,16</sup> - Reduced caregiver utilization and/or paid assistance <sup>4,6,8,16</sup>
<b>ASIBOT</b>	- Improved participation in drinking and brushing teeth <sup>17</sup>
<b>Tooth-click technology</b>	- TC provided faster and more reliable clicks than speech recognition - Persons with tetraplegia performed better with TC/OHM than TC/GHM- explanation is unknown <sup>18</sup>

### Implications:

<b>Practice</b>	<ul style="list-style-type: none"> <li>- Implementation of implanted and surface FES in individuals with spinal cord injuries increase participation in ADLs</li> <li>- Use of surface FES, implanted FES, and EADLs increases participation in IADLs</li> </ul>
<b>Research</b>	<ul style="list-style-type: none"> <li>- Higher level of research to support use of technology in rehabilitation</li> <li>- Exploration of additional types of technology</li> <li>- Larger sample sizes for improved generalizability</li> <li>- More research focused on technology for SCI populations</li> <li>- Need for standardized assessments and protocols</li> </ul>
<b>Education</b>	<ul style="list-style-type: none"> <li>- Explore training options to use various types of technology in practice</li> <li>- Provide patient and caregiver education on available technology</li> <li>- Advocate for systematic training protocols for clients using technology</li> </ul>

### References

1. Kalsi-Ryan, S., & Verrier, M.C. (2011). A synthesis of best evidence for the restoration of upper extremity function in people with tetraplegia. *Physiotherapy Canada*, 63(4), 474-489.
2. National Spinal Cord Injury Statistical Center. (2013). Facts and figures at a glance. Retrieved from [https://www.nscisc.uab.edu/PublicDocuments/fact\\_figures\\_docs/Facts%202013.pdf](https://www.nscisc.uab.edu/PublicDocuments/fact_figures_docs/Facts%202013.pdf)
3. Mangold, S., Keller, T., Curt, A., & Dietz, V. (2005). Transcutaneous functional electrical stimulation for grasping in subjects with cervical spinal cord injury. *Spinal Cord*, 43, 1-13. doi: 1362-4393/05
4. Rigby, P., Ryan, S., & Campbell, K. (2011). Electronic aids to daily living and quality of life for persons with tetraplegia. *Disability and Rehabilitation: Assistive Technology*, 6(3), 260-267.
5. McKinley, W., Tewksbury, M., Sitter, P., Reed J., & Floyd, S. (2004). Assistive technology and computer adaptations for individuals with spinal cord injury. *NeuroRehabilitation*, 19, 141-146.
6. Ripat, J. D., & Woodgate, R. L. (2012). Self-perceived participation among adults with spinal cord injury: A grounded theory study. *Spinal Cord*, 50, 908-914.
7. Peckham, P. H., Keith, M. W., Kilgore, K. L., Grill, J. H., Wuolle, K. S., Thrope, G. B., Gorman, P., Hobby, J., Mulcahey, M.J., Carroll, S., Hentz, V., & Wiegner, A. (2001). Efficacy of an implanted neuroprosthesis for restoring hand grasp in tetraplegia: A multicenter study. *Archives of Physical Medicine and Rehabilitation*, 82(10), 1380-1388.
8. Verdonck, M.C., Chard, G., & Nolan, M. (2011). Electronic aids to daily living: Be able to do what you want. *Disability and Rehabilitation: Assistive Technology*, 6(3), 268-281.
9. The Hill Foundation. (2013). Resources/adaptive technology. Retrieved from: <http://www.facingdisability.com/spinal-cord-injury-resources/categories/adaptive-technology>
10. Alon, G., & McBride, K. (2003). Persons with C5 or C6 tetraplegia achieve selected functional gains using a neuroprosthesis. *Archives of Physical Medicine and Rehabilitation*, 84(1), 119-124.
11. Popovic, M., Thrasher, M., Adams, M., Takes, V., Zivanovic, V., & Tonack, M. (2006). Functional electrical therapy: Retraining grasping in spinal cord injury. *Spinal Cord*, 44, 141-151. doi: 1362-4393/06
12. Taylor, P., Esnouf, J., & Hobby, J. (2002). The functional impact of the Freehand System on tetraplegic hand function. Clinical results. *Spinal Cord*, 40(11), 560-566.
13. Esnouf, J., Taylor, P., & Hobby, J. (2003). Improvement in activities of daily living using the Freehand: A system designed for people with tetraplegia. *The British Journal of Occupational Therapy*, 66(3), 113-117.
14. Mulcahey, M. J., Betz, R. R., Kozin, S. H., Smith, B. T., Hutchinson, D., & Lutz, C. (2004). Implantation of the Freehand System during initial rehabilitation using minimally invasive techniques. *Spinal Cord*, 42(3), 146-155.
15. Bryden, A. M., Memberg, W. D., & Crago, P. E. (2000). Electrically stimulated elbow extension in persons with C5/C6 tetraplegia: A functional and physiological evaluation. *Archives of Physical Medicine and Rehabilitation*, 81(1), 80-88.
16. Rigby, P., Ryan, S., Joos, S., Cooper, B., Jutai, J. W., & Steggle, E. (2005). Impact of electronic aids to daily living on the lives of persons with cervical spinal cord injuries. *Assistive Technology*, 17(2), 89-97.
17. Jardon, A., Gil, A. M., de la Pena, A. I., Monje, C. A., & Balaguer, C. (2011). Usability assessment of ASIBOT: A portable robot to aid patients with spinal cord injury. *Disability and Rehabilitation Assistive Technology*, 6(4), 320-330. doi:10.3109/17483107.2010.52814
18. Simpson, T., Gauthier, M., & Prochazka, A. (2010). Evaluation of tooth-click triggering and speech recognition in assistive technology for computer access. *Neurorehabilitation and Neural Repair*, 24(2) 188-194.